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LAOOAlison Lundergan Grimes  
Kentucky Secretary of State  
Received and Filed:  
2/23/2015 10:11 AM  
Fee Receipt: \$40.00**COMMONWEALTH OF KENTUCKY**  
**ALISON LUNDERGAN GRIMES, SECRETARY OF STATE**Division of Business Filings  
Business Filings  
PO Box 718  
Frankfort, KY 40602  
(502) 564-3490  
www.sos.ky.govArticles of Organization  
Limited Liability Company

KLC

Pursuant to KRS 14A and KRS 275, the undersigned applies to qualify and for that purpose submits the following statements:

Article I: The name of the limited liability company is  
**KJ Executive Protection LLC**

Article II: The street address of the limited liability company's initial registered office in Kentucky is

<b>101 Mitzy Lane</b>	<b>Glasgow</b>	<b>KY</b>	<b>42141</b>
Street Address Only (No Post Office Box Numbers)	City	State	Zip Code

and the name of the initial registered agent at that office is **Kenny Jackson**

Article III: The mailing address of the limited liability company's initial principal office is

<b>101 Mitzy Lane</b>	<b>Glasgow</b>	<b>KY</b>	<b>42141</b>
Street Address or Post Office Box Number	City	State	Zip Code

Article IV: The limited liability company is to be managed by (must check one):



A. a manager(s).



B. its member(s).

Article V: This application will be effective upon filing, unless a delayed effective date and/or time is provided. The effective date or the delayed effective date cannot be prior to the date the application is filed. The date and/or time is \_\_\_\_\_  
(Delayed effective date and/or time)

I/We declare under penalty of perjury under the laws of the state of Kentucky that the foregoing is true and correct.

  
Signature of Organizer**Kenny Jackson**

Printed Name &amp; Title

Date

Signature of Organizer

Printed Name &amp; Title

Date

**Kenny Jackson**I, \_\_\_\_\_, consent to serve as the registered agent on behalf of the limited liability company.  
Print Name of Registered Agent  
Signature of Registered Agent**Kenny Jackson**

Printed Name

Date